[Shri Krishna Kumai]

ment in the country, movements involving students, youths, women and other public organisations, to coma (forward and help Government in fighting the scorage of drug abuse which has the potential to disrupt the very social fabric of our country.

In view of the efforts undertaken by the Government to meet this problem, I suggest that the Resolution may not be pressed.

5 P.M.

DR (SHRIMATI) NAJMA HEPTULLA; Mr Vice-Chairman, Sir, in view of the assurance given by the Honourable Minister and since a law has already been enacted to deal with this menace, 1 hope the Government will fulfil the assurance and take stringent measures. Therefore, I withdraw my Resolution.

THE -VICE-CHAIRMAN (SHRI M.P. KAUSHIK): Is it the pleasure of the House that leave be granted to withdraw the Resolution?

(No hon. Member dissented)

*The Resolution was, by leave, withdrawn.*

[MR. DEPUT *Y* CHAIRMAN in the chair]

MR. DEPUTY CHAIRMAN: Now, Shrimati Mohsina Kidwai, Minister of Health and Family Welfare will make a statement.

SHRl CHITTA BASU (West Bengal): Mr Deputy Chairman, Sir, I have got a point of order to make. Two minutes were left before that Resolution was disposed of and as a matter of rule the second Resolution should have been taken up. Therefore, I want that I should be given a chance to move my Resolution and the Minister cannot intervene during thi; period because it is a Private Members' time.

DR (SHRIMATI) NAJMA HEPTULLA: Mr. Basu, $i_s$ was my privilege; to reply and withdraw the Resolution. The Minister intervened when only one minute was left and it was already 5 O'clock so I sat down.

SHRI CHITTA BASU: We ,had two minutes to move my Resolution.

Mr. DEPUTY CHAIRMAN: Now, the matter is over. Please sit down.

Tlie Minister will make the statement,

## STATEMENT BY MINISTER IT. RE. Government decisions! on the Report of the Medical Education Review Committee

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI MOHSINA KIDWAI): Sir, I place on the Table, the Report of the Medical Education Review Commutes and also a Statement indicating the decisions of the Government on the recommendations of the Committee. The terms of reference of the Committee were as follows:—

(i) to review the current admission procedures (including entrance tests) and domiciliary restrictions $fo_r$ admissions to unde'r-graduate and post-graduate courses and to make suitable recommendations separately, in regard thereto;

(ii) to suggest measures aimed at bringing about overall improvement in the under-graduate and postgraduate medical education, paying due attention to:

(a) institutional goals;

(b) content, relevance and quality of teaching and training and learning settings; and

(c) evaluation systems and standards:

(iii) to recommend the optimum duration of under-graduate and post-graduate courses of study separately;

(iv) to examine the existing Internship programme and to recommend its future pattern;

(v) to review the working of the Residency Scheme along with the Housemanship Programme and to make recommendations regarding a uniform pattern of post-graduate training;

(vi) to examine the current requirement of Thesis or Dissertation as an essential part of postgraduate medical education and to make suitable recommendations in regard thereto; and

(jvii) to examine thie feasibility of a period of service in the rural areas for medical graduates and post-graduates.

The Committee was also asked to olve realistic projections of medical manpower requirements.

The recommendations of the Com mittee were examined at great length by the Ministry. The developments which took place in the field of medi cal education subsequent to the receipt of the Report, have also been taken into consideration. I am also placing on the Table a Statement indicating briefly the recommenda- tions of the Committee and the deci sions of the Government on the recommendations. Most of the recom mendations have been accepted. Some of the recommendations which are accepted would require to be imple mented by various ageneies such as the medical colleges, State Govern ments, Medical Council of India, other autonomous organisations involved in the field of medical education and the Central Government. Tn these cases action will be initiated in consultation with the concerned bodies for the early implementation of the recommendations involving ♦hem. Certain recommendations are already under implementation and these would be scrutinised and reviewed to ensure adequate and full implementation. There are recommendations involving amendments to the Indian Medical Council Act, 1956.-Action is under way in this regard. The far-reaching recommendations of the Committee relate to the establishment of Medical and Health Universities and setting up a Medical and Health Education Commission. The Centiral Government have accepted these recommendations in principle.. However, the structure of these organisation, modalities of their operation, status and various other matters relating to their! establishment and functioning would require to be examined before bringing them into existence. These would receive, however, immediate attention of the Ministry.

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SHRI PARVATHANENI UPENDRA (Andhra Pradesh): Sir, this is a very important thing. We require time for a full discussion. You kindly fix some time next week.

MR, DEPUTY CHAIRMAN: Now, further discussion on Information and Broadcasting Ministry. Shrimati Renuka Chowdhury.

## DISCUSSION ON THE WORKING OF THE MINISTRY OF INFORMATION AND BROADCASTING—Contd.

SHRIMATI RENUKA CHOWDHURY (Andhra Pradesh): Mr. Deputy Chairman, Sir, I thank you for the privilege of allowing me to address this august House this after noon in what is going to be my maiden speech. While I start, I urge the Minister for the Ministry of Information and Broadcasting with a s*nse of urgency to ^evaluate and evaluate what the Ministry has accomplished till today. While they have claimed that the Ministry of Information and Broadcasting is to entertain, inform and educate the masses, the question comes, are we really communicating? The essence of communication is to be able to get down to the people and initiate action in them to take part in the social activities while taking into considera tion the language they speak in at their level of intelligence and understanding and their cultural and social traits—which must be considered. Now, are we as a Ministry and as people executing thes$_e$ lofty ideals? There seems to be a yawning sap in what thev practise and what they preach? While just half the nation tune in on the radio, one of the most nowerfui media, half the time to the British Broadcasting Corporation. This has been proven even by the Prime Minister who has etone on record that several times, items of national importance and urgency, we have been forced to lister, to by an external country. It is with a sense of outrage and anger that any patriotic Indian would feel irrespective of what party they belong to or what political leanings they have, that we are denied the right to information. I make this a point that we niust have the $^{Da}$sic "right to information" as much as, the right to freedom of speech. Who plays "God" and denies to the average India$_n$ that he should not know what is happening in his country? Matters of urgency including the Charles Shobraj case where a disreputed criminal with multi-murders to his unfavourable reputation sits in the Tihar jail, first he escapes from the Tihar jail which in itself is an insult to the system and then we are compounding the injury. Add to another Ministry is aiding and abetting the crime. If this was done in civil life, it would be punishable offence because you (Ministry of I & B) are correspondent to the crime and the whole nation is sitting back and listening to an outside country informing you about it. It is a matter I of shame, the radio which was one of ' the most effective instruments of media in the late fifties and early sixties where the programmes like the Ghana family planning which the UNESCO recognised, there was a radio vice" which was propagated in Tamil Nadu—because the provinces had the control in those days to communicate to their people in their own languages. In a country like ours, we have multi-lingual systems and we have so many people. Who takes a decision that we will only speak m Hindi and why? is it only that we reach just 50 per cent of the target audience? Radio today has lost that effectiveness because of the bifurcation of attention and of course, the growing multi media channel that have been put in to use today. While not denying the importance of TV and tne printed media, one cannot overlook the reach that the radio has. It has penetrated the most interior villages and it is in the pockets of every farmer, educated and uneducated, and they have learnt to operate ;t. So one cannot realiy neglect radio in the course of pursuing television.